PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number
/
120/20-011

	Effective October 1, 2000 09/6 9091/											
						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			5				RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			5 minus 20=				X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*		X40	- 1		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+135				+270=	
* If the difference in column 1 is less than zero, enter "0" ir						column 2	TOTA		25-5	OR	TOTAL	
CLAIMS AS AMENDED - PART II							1017	\L	355.00	OR	OTHER	THAN
(Column 1)				(Column		(Column 3)	SN!A	LL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	a.	HIGH NUM PREVIO PAID	BER DUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	2	0	=)	X\$ 9	=)		OR	X\$18=	
AME	Independent	Minus ····				=	X40:	7	<u> </u>	OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		+135	= /		OR	+270=	
							TO ADDIT. F	TAL		OR	TOTAL ADDIT. FEE	
		ADDIT. I	- C.C. 1			, ADDII. 1 EE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	4	PREVI	HEST BER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 10	Minus	** á	70	= -	X\$ 9			OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	3 ECLAIM	= —	43×40	=		OR	5 × × × × × × × × × × × × × × × × × × ×	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							j=		OR	+270=	
								TAL EE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	Praise (NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X40:	_			X80=	
L_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135	十		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-875

(Rev. 8/00)